SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Omar Reyes #08880-280
BSCC Cedar Hill Unit
3711 Wright Ave.
Big Spring, TX 79720
3:07-cr-02657-PRM-1 Doc 23 mg

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X A. Barrientes ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) Ashley Barrientes
C. Date of Delivery 9-9-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number (*Transfer from service label*) 7010 1670 0000 7322 7119

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

FILED
2013 SEP 11 PM 1:36
DISTRICT COURT
DISTRICT OF TEXAS
DEPUTY

CLERK, U.S. DISTRICT COURT
WESTERN DISTRICT OF TEXAS
UNITED STATES COURTHOUSE
525 MAGOFFIN AVENUE, ROOM 105
EL PASO, TEXAS 79901